

CAMPAIGN FINANCE REPORT

PAGE 1 OF 1

(COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number:		Report Filed By:		CANDIDATE ^{1.}		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}	
Name of Filing Committee, Candidate or Lobbyist: Citizens For McClure									
Street Address: 4110 Schermon Blvd.									
City: Bethlehem				State: PA		Zip Code: 18020			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3.	AMENDMENT REPORT?	YES	NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6. <input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	YEAR	2007		FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE
Name of Office Sought by Candidate: County Council				DATE OF ELECTION MO. DAY YEAR 11 06 2007		District Number 3	Office Code	Party Code DEM	County Code 48
						(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO. DAY YEAR 10 22 2007		To MO. DAY YEAR 11 26 2007		FOR OFFICE USE ONLY			
A. Amount Brought Forward From Last Report		\$		9,453.55		ENTERED 2007 DEC -4 P 2:28 NORTHAMPTON COUNTY ELECTION OFFICE EASTON, PA 18042			
B. Total Monetary Contributions and Receipts (From Schedule I)		\$		5,040.00					
C. Total Funds Available (Sum of Lines A and B)		\$		14,493.55					
D. Total Expenditures (From Schedule III)		\$		24,235.00					
E. Ending Cash Balance (Subtract Line D from Line C)		\$		0					
F. Value of In-Kind Contributions Received (From Schedule II)		\$		0					
G. Unpaid Debts and Obligations (From Schedule IV)		\$		9,770.31					

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

3rd day of December 20 07

Signature of Notary Public
 Iris N. Linares, Notary Public
 City of Bethlehem, Northampton County
 My Commission Expires Jan. 20, 2011

My commission expires

Signature of Person Submitting Report
 Brian J. Taylor

Printed Name
 Brian J. Taylor

610

Area Code

866-3333
 Daytime Telephone Number

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this

3rd day of December 20 07

Signature of Notary Public
 Iris N. Linares, Notary Public
 City of Bethlehem, Northampton County
 My Commission Expires Jan. 20, 2011

My commission expires

Signature of Candidate
 Lamont G. McClure, Jr.

Printed Name
 Lamont G. McClure, Jr.

610

Area Code

866-3333
 Daytime Telephone Number

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate

Citizens For McClurg

Reporting Period

From 10/22/07 To 11/26/07

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period (1) \$ 40.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)

Contributions Received from Political Committees (Part A) \$ 500.00All Other Contributions (Part B) \$ 0TOTAL for the Reporting Period (2) \$ 500.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)

Contributions Received from Political Committees (Part C) \$ 3000.00All Other Contributions (Part D) \$ 1,500.00TOTAL for the Reporting Period (3) \$ 4,500.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)

TOTAL for the Reporting Period (4) \$ 0

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)

\$ 5,040.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period			
Citizens For McClure				From 10/27/07 To 4/26/07			
				DATE			AMOUNT
Full Name of Contributing Committee				MO.	DAY	YEAR	
Friends of John Callahan				10	24	07	\$ 250.00
Mailing Address				MO.	DAY	YEAR	\$
P.O. Box 1403							
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Bethlehem	PA	18016 -					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
ED O'Brien Dinner Fund				10	30	07	\$ 250.00
Mailing Address				MO.	DAY	YEAR	\$
219 Mount Airy Ave.							
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Bethlehem	PA	18018 -					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 500.00

PART C

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

OVER \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate

Citizens For McClure

Reporting Period

From 10/22/07 To 11/26/07

			DATE			AMOUNT
Full Name of Contributing Committee	MO.	DAY	YEAR			
Citizens For Glenn F. Reibman	10	25	2007	\$		1000.00
Mailing Address	MO.	DAY	YEAR	\$		
1231 Lieb Rd.						
City	MO.	DAY	YEAR	\$		
Easton						
State	MO.	DAY	YEAR	\$		
PA						
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
18040						
Citizens For Glenn F. Reibman	10	30	07	\$		1000.00
Mailing Address	MO.	DAY	YEAR	\$		
1825 K St. N.W.						
City	MO.	DAY	YEAR	\$		
Washington						
State	MO.	DAY	YEAR	\$		
DC						
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
20006						
Wolf Block PAC	11	2	07	\$		1000.00
Mailing Address	MO.	DAY	YEAR	\$		
1650 Arch St. FL 22						
City	MO.	DAY	YEAR	\$		
Philadelphia						
State	MO.	DAY	YEAR	\$		
PA						
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
19103						
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		

PAGE TOTAL

\$ 3000.00

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PART D
ALL OTHER CONTRIBUTIONS

PAGE 6 OF 1

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate Citizens For McClure	Reporting Period From 10/22/07 To 11/26/07
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		DATE			AMOUNT
		MO.	DAY	YEAR	
Full Name of Contributor R. Bruce McElhone		10	25	2007	\$ 500.00
Mailing Address 907 Ridge Crest Way		MO.	DAY	YEAR	\$
City Bel Air	State MD	Zip Code (Plus 4) 21015			\$
Employer Name Peter G. Angelos, P.C.		Occupation Attorney			
Employer Mailing Address/Principal Place of Business One Charles Ctr., Baltimore MD 21201					
Full Name of Contributor James J. Burke, Esq		10	26	2007	\$ 500.00
Mailing Address 1490 Highland Dr.		MO.	DAY	YEAR	\$
City Bethlehem	State PA	Zip Code (Plus 4) 18015			\$
Employer Name Self		Occupation Attorney			
Employer Mailing Address/Principal Place of Business 60 W. Broad St., Bethlehem, PA 18018					
Full Name of Contributor Michael Sandler		10	29	07	\$ 500.00
Mailing Address 151 McNair Ct.		MO.	DAY	YEAR	\$
City Somerset	State NJ	Zip Code (Plus 4) 08873			\$
Employer Name VeriText		Occupation Executive			
Employer Mailing Address/Principal Place of Business 3055 College Heights Blvd., Allentown, PA 18104					
Full Name of Contributor		MO.	DAY	YEAR	\$
Mailing Address		MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)			\$
Employer Name		Occupation			
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor		MO.	DAY	YEAR	\$
Mailing Address		MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)			\$
Employer Name		Occupation			
Employer Mailing Address/Principal Place of Business					

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1,500.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate

Citizens For McCluer

Reporting Period

From 10/22/07 To 11/26/07

To Whom Paid	MO.	DAY	YEAR	Amount
Northampton County Democratic Comm. 2117 Montgomery St. Bethlehem PA 18017 -	10	29	07	\$ 2000.00
Description of Expenditure Contribution				
United States Postal Service 535 Wood St. Bethlehem PA 18016 -	10	23	07	\$ 1281.00
Description of Expenditure Postage/Direct Mail				
United States Postal Service 535 Wood St. Bethlehem PA 18016 -	10	26	07	\$ 1929.00
Description of Expenditure Postage/Direct Mail				
United States Postal Service 535 Wood St. Bethlehem PA 18016 -	10	30	07	\$ 1929.00
Description of Expenditure Postage/Direct Mail				
Northampton County Democratic Comm. 2117 Montgomery St. Bethlehem PA 18016 -	10	30	07	\$ 5000.00
Description of Expenditure Contribution				
Political Strategies, Inc. 1229 Ocean Ave. Santa Monica CA 90401	11	1	2007	\$ 11,096.00
Description of Expenditure Printing/Direct Mail Services				
Northampton County Democratic Comm. 2117 Montgomery St. Bethlehem PA 18017	11	26	2007	\$ 1000.00
Description of Expenditure Contribution				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
Description of Expenditure				
City	State	Zip Code (Plus 4)		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 24,235.00

SCHEDULE IV
STATEMENT OF UNPAID DEBTS

PAGE 12 OF 1

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate

Citizens For McClure

Reporting Period

From 10/22/07 To 11/26/07

Name of Creditor						Outstanding Balance of Debt
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
			<u>11</u>	<u>22</u>	<u>07</u>	\$ <u>9,770.31</u>
City		State	Zip Code (Plus 4)			
<i>Bethlehem</i>		<i>PA</i>	<i>18020</i>			
Description of Debt		<i>Loan/ Self Amounts brought forward from previous report</i>				
Name of Creditor						Outstanding Balance of Debt
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL
						\$